

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		11-2-00
O.I.P.E. CLASSIFIER			11-28-00
FORMALITY REVIEW	MTB	954	12-05-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
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12	✓
13	✓
14	0
15	0
16	0
17	0
18	✓
19	✓
20	✓
21	0
22	0
23	0
24	0
25	0
26	0
27	✓
28	✓
29	✓
30	✓
31	✓
32	0
33	✓
34	✓
35	✓
36	✓
37	✓
38	0
39	0
40	✓
41	✓
42	✓
43	0
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓
52	✓
53	✓
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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Best Available Copy